## **Application Data Sheet**

### **Application Information**

Application number:: TBA
Filing Date:: 07/29/03
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Minor-End Loading Carton

NO

Attorney Docket Number:: 000242.00161

Request for Early Publication?:: NO

Suggested Drawing Figure::

Request for Non-Publication?::

Total Drawing Sheets:: 10

Small Entity?:: NO

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

#### **Applicant Information**

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Stephen

Middle Name:: E.

Family Name:: Moorman

Name Suffix::

City of Residence:: Madera

State or Province of Residence:: California

Country of Residence:: USA

Street of mailing address:: 3132 Forest Court

City of mailing address:: Madera

State or Province of mailing address:: California

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 93637

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Anthony

Middle Name::

Family Name:: Fulton

Name Suffix::

City of Residence:: Aurora

State or Province of Residence:: Colorado

Country of Residence:: USA

Street of mailing address:: P. O. Box 31426

City of mailing address:: Aurora

State or Province of mailing address:: Colorado

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 80041

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 22907

#### Representative Information

Representative Customer Number:: 22907

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

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### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

## **Assignee Information**

Assignee name:: Georgia-Pacific Corporation

Street of mailing address:: 133 Peachtree Street, N. E.

City of mailing address:: Atlanta

State or Province of mailing address:: Georgia

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 30303